

Department of Building and Code Enforcement · 295 N. Harrison Ave. · Kankakee · IL · 60901 · 815-936-7390

Contractor Registration Application

<u>Instructions to applicants</u>: Complete form by filling in all information. Supporting documentation and payment MUST accompany the signed application when submitted. Incomplete applications will not be accepted. Please submit the following:

- Completed application
- \$150.00 annual Registration fee payable to the City of Kankakee (Fee does NOT apply to Illinois Licensed Plumbers.)
- Copy of Liability Insurance, \$1,000,000.00 for General Liability, \$100,000.00 for Workers Compensation and Employers Liability, \$50,000.00 for Property Damage Liability with City of Kankakee listed as the Certificate Holder.
- License or surety bond issued to the **City of Kankakee** in the amount of \$10,000.00
- Roofing Contractors must include a copy of Illinois State Roofing License
- Plumbing Contractors must include a copy of Illinois State Plumbing License
- **Electrical Contractors** must include a copy of an electrical license issued by a municipality within the State of Illinois.
- Copy of Driver's License for all persons with permission to pull permits.

Business Name:	Application Date:	
Business Address:	Contact Person:	
	Phone#:	
	Mobile#:	
Liability Insurance Carrier:		
Print Contractor Name:	E-mail:	
Contractor Signature:		
Che	ck appropriate classification(s)	
Carpentry	Excavating	Plumbing
Concrete/ Masonry	Fencing	Pool Installation
Damp/Water Proofing	Fire Protection	Roofing
Decks	General Contractor	Siding/Windows/Doors
Demolition/Abatement	Gas Piping	Sign Installation
Drywall	Handy-Man	Tree Trimming/Removal
Electrical	HVAC/ Mechanical	Sewer
Elevator/Lift	Other	
Bond and Certificate of Insu	rance must accompany com	pleted application form



NOTE: MAIL, DO NOT FAX, ALL MATERIALS TO:

THE CITY OF KANKAKEE - BUILDING AND CODE ENFORCEMENT DEPARTMENT ATTN: CONTRACTOR REGISTRATION 295 N. Harrison Ave.

Kankakee, IL 60901

FOR OF	FICE USE ONLY			
Reg. Paid Date:	Registration Exp. Date:			
Liability Ins. Exp. Date:	Work Comp. Exp. Date:			
Surety Bond Exp. Date:	Assigned Registration #:			
Reviewed By:	Card Issued:	/	/	
(Code Official)	(Date)	(Exp. Date)	(Reg #)	

Company Officer Information Sheet

Name of Owner:
Home Address:
Phone Number:
Signature
Name of Owner:
Home Address:
Phone Number:
Signature
Name of Owner:
Home Address:
Phone Number:
Signature
Person(s) able to pull permits
Name:
Home Address:
Phone Number:
Signature
Name:
Home Address:
Phone Number:
Phone Number: Signature
Signature
Signature
Signature Name:
Signature Name: Home Address:
Signature Name: Home Address: Phone Number:
Signature Name: Home Address: Phone Number:
Signature Name: Home Address: Phone Number: Signature
Signature Name: Home Address: Phone Number: Signature Name: